

Office Use Only	
Date Received:	
Date Completed:	

	BUILDING PERMIT APPLICATION					
APPI	Property Owner Tenant					
JCAN	Applicant Name					
NFC -	Mailing Address			Project Address		
	Suite/Unit/Apt		City	State	Zip Code	
ATIO	Tel#		Contact Person Name/Tel#			
	Property Owner Name		Property Owner Tel#			
	☐ Architect ☐ Designer ☐ Contractor ☐ Engineer					
	Name					
	Company Address		City	State	Zip Code	
	Tel#		Fax	E-mail	•	
	Company Name					
	License/Registration #					
	Contact Person Name/ Tel #					
Saga	Fees					
	Building Permit Fee \$80.00 plus Cost of Requested Service (Includes First Inspection) Re-Inspect Fee \$60.00					
INFO						
	Type of Work (Check All That Apply)					
	NewAddition	Brief Description of	Work:			
	Alteration					
	Repair Move					
	Remove	Valuation of Work: \$	S			
PLE	Shed (Drawings Needed) (Please Note: Additional information may be required based on the extent of the job)					
ASE	Please Note					
PLEASE NOTE	Inspections are held Mondays, Wednesdays, and Fridays. Inspections must be called at least one day in advance.					
	IMPORTANT					
	Any person who is issued a permit which authorizes improvements to a tract of real property which is being used or will be used for residential purposes shall be required to post a copy of such permit in a well seen place in the vicinity of such property where such improvements are being undertaken. *** All Fees Are Due Prior To Issuance ***					

Owner Signature

Date

Owner Print Name